

PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____

Bu. Vou. No. _____

2429

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

Voucher prepared at _____

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. _____

To _____

(Payee)

PAID BY

Check #15

DD-2422-59

COPY 1 OF 2

(Address)

(City)

(State)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Cost				\$4,802.	54

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Use continuation sheet(s) if necessary

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total \$4,802.54

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

(Sign original only)

Differences _____

Date 3-31-59 *Payee

(When a like certificate is made by payee on attached bill or bills)

Amount verified; correct for
(Signature or initials) *EL*

\$4,802.54

Per _____ Title _____
Contract No. _____ Date _____ Req. No. _____ Date _____ Invoice Rec'd. _____

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ _____

† _____
(Authorized Certifying Officer)

By _____

SIGN
ORIGINAL
ONLY

Title _____

Title _____

Date _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19____, for \$ _____ (on Treasurer of the United States in favor of payee named above.)
Cash, \$ _____, on _____, 19____ Payee _____
(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear.
† If the ability to certify and authority to approve are conferred in any other manner, one signature only is necessary; otherwise the approving officer will sign on the line below approved for \$ _____, and over his official title.

Per _____
Title _____

STATOTHR

SUPP#	SUPPLIER NAME	MO	DY	CHECK#	INVOICE	P	O	ACC	ODC	MJO	SO	WK	ORDR	AMOUN	BATCH	TR	M	D	Y
171	MONITOR PRODUCTS C																		
171	MONITOR PRODUCTS C																		
7749		12501	1	3032	58									140					
8052		12501	1	3032	58									392					
1613A		45848	12501	1	3032	58								8160					
16158		45850	12501	1	3032	58								12240					
														20932	*				

20932 **

20932 *

WKLY PURCH DIST 3/22/59

SUPP#	SUPPLIER NAME	NO	BY	CHECK#	INVOICE	P	O	ACC	ODC	MJO	SO	WK	ORDR	AMOUN	BATCH	TR	M	D	Y
127	ELECTRONIC SUPPLY																		
1516	EMBEE PLATING AND																		
3744	GRACE ROBERTS																		
4036	CURTIS TOOL & SUPP																		
4036	CURTIS TOOL & SUPP																		
4036	CURTIS TOOL & SUPP																		
3744	GRACE ROBERTS																		

35922 **

Supp

SUPPLIER NAME

NO DY CHECKS INVOICE

ACC

DOC in

CS C

ORDER

Activity

BATCH 18 M. D. Y.

15428
9280

7776	12501	1	3070	01
7774	12501	1	3070	01
8038	12501	1	3070	01
8040	12501	1	3070	01

961
526
14400
4400

8	
90 0	3 19 9
91 0	3 20 9

20287 ~~44~~

20267 卷六

SAPP#	SUPPLIER NAME	NO BY CHECK#	INVOICE	P O	ACC	QDC	MDO	SO	WK	ORDR	AMOUN	BATCH	TR M	D Y
136	KIERULFF ELECTRONI			7745	12501	1	3093	65			109			
174	MCFADDEN / SHAYNE			7746	12501	1	3093	65			755			
174	MCFADDEN / SHAYNE			3168	7044-12501	1	3093	65			2856			
252	VALLEY ELECTRONICS			3185	7045 12501	1	3093	65			4800			
260	WALTON TOOL & DIE			36306	7184 12501	1	3093	65			35368			
260	WALTON TOOL & DIE			4822	7034 12501	1	3093	65			410			
260	WALTON TOOL & DIE			4824	7031 12501	1	3093	65			4800			
260	WALTON TOOL & DIE			4824	7031 12501	1	3093	65			21000			
734	AVNET CORP			48230	7033 12501	1	3093	65			21000			
1516	EMSEE PLATING AND			4855	7032 12501	1	3093	65			5200			
2048	TRANSVAL ENGINEERI			22243	7172 12501	1	3093	65			2445			
				17282	6487 12501	1	3093	65			500			
				3121	7020 12501	1	3093	65			18000			
											117263 *			
											117263 **			

WPLY PURCH DIST	3/22/59	WPLY PURCH DIST	3/22/59
3744 GRACE ROBERTS	16256	40	7734 12501 1 3093 75
96	96	96	96
96	96	96	96

117359 ***

SUPP#	SUPPLIER NAME	MO	DY	CHECK#	INVOICE	P	O	ACC	ODC	MJO	SO	WK	ORDR	AMOUN	BATCH	TR	M	D	V
3145	SPACE TECHNOLOGY L																		
		105		4253	12501	1	5047	17						6290		74	0	3	17
														6290	*				

6290 **
6290 ***